

STANDARD FORM 52 PROBATIONED BY THE U. S. CIVIL SERVICE COMMISSION JANUARY 1950—FEDERAL PERSONNEL MANUAL CHAPTER III		UNVOUCHERED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) Major Lucien B. CONLIN		2. DATE OF BIRTH 29 Nov 1919	3. REQUEST NO.
4. DATE OF REQUEST 13 Aug 56		5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) SEPARATION (RETURN TO PAYMENT SERVICE)	
B. POSITION (Specify whether establish, change grade or title, etc.)		6. EFFECTIVE DATE A. PROPOSED: 15 Oct 1956 B. APPROVED:	
7. C. S. OR OTHER LEGAL AUTHORITY			
FROM— IO (FI) Major, USA DDP/FE Branch 4 - Vietnam Saigon Military Station CI/PI Section (Saigon, Vietnam) 13-2 <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL DI		TO— 8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
A. REMARKS (Use reverse if necessary)			
B. REQUESTED BY (Name and title) H.P. GILBERT, FE PERSONNEL OFFICER		D. REQUEST APPROVED BY Signature: _____ Title: _____	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) 03 (Doris Welch) 2-3325			
13. VETERAN PREFERENCE NONE WWII OTHER 5-PT. 10-POINT DISAB. OTHER		14. POSITION CLASSIFICATION ACTION NEW VICE I. A. REAL MILITARY	
15. SEX M		16. APPROPRIATION FROM: 7-3725-55-039 TO:	
17. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)		18. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY)	
19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:			
20. STANDARD FORM 50 REMARKS No action			
21. CLEARANCES A. INITIAL OR SIGNATURE DATE REMARKS: B. CEIL. OR POS. CONTROL C. CLASSIFICATION D. PLACEMENT OR EMPL. E.			
F. APPROVED BY SS [Signature]			

22. RESIGNATION

I RESIGN FOR THE FOLLOWING REASON:

DATE _____

1. FOR CONFLICT

2. OVERWORK

3. HEALTH OR FAMILY

4. EDUCATION

5. OTHER

MY LAST WORKING DAY WILL BE _____

(SIGNATURE) _____

23. SEPARATION DATA

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS:

ZIP CODE

☐ UNIFORMED☐ UNIFORMED

STREET

CITY

STATE

(ZONE)

(STATE)

REMARKS (Continued)

DISC. CODE

REMARKS

1. DISC. CODE

2. DISC. CODE

3. DISC. CODE

4. DISC. CODE

5. DISC. CODE

6. DISC. CODE

7. DISC. CODE

Y.P.

1. DISC. CODE

2. DISC. CODE

3. DISC. CODE

Y.P.

1. DISC. CODE

2. DISC. CODE

3. DISC. CODE

Y.P.

1. DISC. CODE

2. DISC. CODE

3. DISC. CODE

1. DISC. CODE

2. DISC. CODE